

DATE:

TO: OFFICE OF ADMINISTRATIVE HEARINGS

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FROM:

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Steven V. Adler, Presiding Judge

REGIONAL CENTER REQUEST TO SET LANTERMAN FAIR HEARING/MEDIATION (Cal. Code Regs., tit. 1, § 1018)		
CLAIMANT NAME	, , , , , ,	OAH CASE NO.
NAME OF REGIONAL CENTER		
REGIONAL CENTER REPRESENTATIVE/ATTORNEY Name, Address, Telephone and Facsimile Nos.	CLAIMANT Name, Address, Telephone and Facsimile N	CLAIMANT AUTHORIZED REPRESENTATIVE/ATTORNEY Name, Address, Telephone and Facsimile Nos.
Hearing Only Mediation Only Hearing and Mediation		
DATE FAIR HEARING REQUEST RECEIVED BY REGIONAL CENTER MEDIATION Accepted Declined		
TIME ESTIMATE FOR HEARING	TIME ESTIMATE FOR MEDIATION	INTERPRETER NEEDED?
HOURS DAYS	HOURS DAYS	SPECIFY LANGUAGE
DATES PREFERRED	DATES UNAVAILABLE	HEARING LOCATION
DATES COORDINATED WITH ALL PARTIES? Yes No		
ADDITIONAL COMMENTS AND/OR INSTRUCTIONS, REQUEST FOR ACCOMMODATION		
COMPLETED BY	DATE COMPLETED	DATE FAXED TO OAH
ATTACH: (1) FAIR HEARING REQUEST; (2) NOTICE OF PROPOSED ACTION		